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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	James First name R. Middle name Mortensen Last name and Suffix (Sr., Jr., II, III)	Esther First name C. Middle name Mortensen Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7174	xxx-xx-3616

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Debtor 1 James R. Mortensen
Debtor 2 Esther C. Mortensen

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	5041 Linden Road, Apt. 11202 Rockford, IL 61109	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Winnebago			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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	otor 1 James R. Mortens otor 2 Esther C. Mortens				Case number (if known)	
Par	rt 2: Tell the Court About	Your Bankrun	tcv Case			
7. The chapter of the Bankruptcy Code you are		Check one. (For a brief descripti	tion of each, see <i>Notice Requir</i> p of page 1 and check the app	red by 11 U.S.C. § 342(b) for Individuals Filir ropriate box.	ng for Bankruptcy
	choosing to file under	■ Chapter 7	7			
		☐ Chapter 1	1 1			
		☐ Chapter 1	2			
		☐ Chapter 1	3			
8.	How you will pay the fee	about l order. a pre-p	now you may pay. If your attorney is sorinted address.	Typically, if you are paying the submitting your payment on you	e check with the clerk's office in your local confee yourself, you may pay with cash, cashie ur behalf, your attorney may pay with a credition of the conference of the confer	er's check, or money it card or check with
				nents (Official Form 103A).	is option, sign and attach the Application for	mulviduais to Fay
		□ I request that my fee be waived (You may request this option only if you are but is not required to, waive your fee, and may do so only if your income is leapplies to your family size and you are unable to pay the fee in installments) the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103E)				ficial poverty line that on, you must fill out
9.	Have you filed for	eve you filed for No.				
	bankruptcy within the last 8 years?	☐ Yes.				
		D	istrict	When	Case number	
		D	istrict	When	Case number	
		D	istrict	When	Case number	
10.	Are any bankruptcy cases pending or being	■ No				
10.	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		D	ebtor		Relationship to you	
		D	istrict	When	Case number, if known	
		D	ebtor		Relationship to you	
		D	istrict	When	Case number, if known	
11.	Do you rent your residence?	□ No.	Go to line 12.			
	residence?	Yes.	Has your landlord o	obtained an eviction judgment	against you and do you want to stay in your	residence?
			No. Go to li	ine 12.		

bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

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	otor 1 James R. Mortens otor 2 Esther C. Mortens		2004	Case number (if known)		
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
		☐ Yes.	Name and location of bus	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.					
	If you have more than one sole proprietorship, use a		Number, Street, City, Sta	te & ZIP Code		
	separate sheet and attach it to this petition.		Check the appropriate bo	ox to describe your business:		
				ness (as defined in 11 U.S.C. § 101(27A))		
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
			_ •	lefined in 11 U.S.C. § 101(53A))		
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
			☐ None of the above	e		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am not filing under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and	■ No.	What is the hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs		If immediate attention is			
	immediate attention?		needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
	•			Number, Street, City, State & Zip Code		

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Debtor 1 James R. Mortensen
Debtor 2 Esther C. Mortensen

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

] Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-82089 Doc 1 Filed 09/02/16 Entered 09/02/16 10:48:29 Desc Main Document Page 6 of 54

Debtor 1 James R. Mortensen Debtor 2 Esther C. Mortensen Case number (if known) **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." □ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts ☐ No. 17. Are you filing under I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for □ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100,001 - \$500,000 □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ James R. Mortensen /s/ Esther C. Mortensen James R. Mortensen Esther C. Mortensen Signature of Debtor 1 Signature of Debtor 2 Executed on September 2, 2016 Executed on September 2, 2016 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Debtor 2	James R. Mortens Esther C. Mortens		Page 7 of 54	se number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have	explained the relief available under ea	ach chapter
If you are not represente an attorney, you do not i to file this page.	ey, you do not need	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.			
		/s/ Jason H. Rock	Date	September 2, 2016	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Jason H. Rock			
		Printed name			
		BARRICK SWITZER LAW OFFICE			
		Firm name			
		6833 Stalter Drive			
		Rockford, IL 61108			
		Number, Street, City, State & ZIP Code			

Bar number & State

Email address

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Debtor 1 James R. Mortensen Document F
Debtor 2 Esther C. Mortensen

Case number (if known)

Par 16	t 6: Answer These Quest What kind of debts do	16a.		willy concurred delated of		
10.	you have?	rod.	individual primarily for	arily consumer debts? Cons a personal, family, or househ	sumer debts are defi nold purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
	t	16b.	Are your debts primate money for a business of	rily business debts? Busine or investment or through the	ess debts are debts operation of the bus	that you incurred to obtain iness or investment.
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts	you owe that are not consun	ner debts or busines	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Ch	napter 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapte are paid that funds will	er 7. Do you estimate that afi be available to distribute to ι	ter any exempt proponsecured creditors?	erty is excluded and administrative expenses
	administrative expenses	,	■ No			
are paid that funds will be available for distribution to unsecure creditors?	be available for distribution to unsecured		☐ Yes			
18.	How many Creditors do	1 -49		□ 1,000-5,000		□ 25,001-50,000
	you estimate that you owe?	□ 50-99		□ 5001-10,000		□ 50,001-100,000
		☐ 100-1 ☐ 200-9		☐ 10,001-25,00		☐ More than100,000
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	\$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001		☐ \$1,000,000,001 - \$10 billion
		☐ \$100,001 - \$500,000 ☐ \$500,001 - \$1 million		□ \$50,000,001 □ \$100,000,00		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	\$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	\$10,000,001	- \$50 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,001		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
Part	7: Sign Below					
or y	you	I have ex	amined this petition, and	I declare under penalty of pe	erjury that the inform	nation provided is true and correct.
		If I have of United St	chosen to file under Chap ates Code. I understand	oter 7, I am aware that I may the relief available under eac	proceed, if eligible, ch chapter, and I cho	under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.
		If no attor documen	ney represents me and I t, I have obtained and rea	did not pay or agree to pay sad the notice required by 11	someone who is not U.S.C. § 342(b).	an attorney to help me fill out this
		I request	relief in accordance with	the chapter of title 11, United	d States Code, spec	ified in this petition.
		Tundersta bankrupto and 3571	cy case can result∤n fines	nent, concealing property, or s up to \$250,000, or imprisor	obtaining money or nment for up to 20 ye	property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Syr			Euth (12	Mortenio
,			R. Mortensen		Esther C. Morten Signature of Debtor	
		Executed	on September 1, 2	016		tember 1, 2016

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Fill in this infor	mation to identify yo	ur case:			
Debtor 1	James R. Mort	ensen Middle Name	Last Name		
Debtor 2	Esther C. Mort	ensen			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the	NORTHERN DISTRICT	F OF ILLINOIS		
Case number					
(if known)					Check if this is an mended filing
Official For	-	an Individual	Debtor's Sc	hadulas	12/15
				1000100	12,13
	i8 U.S.C. §§ 152, 134 n Below	1, 1519, and 35/1.			
Did you pa	y or agree to pay so	meone who is NOT an attor	rney to help you fill out ba	ankruptcy forms?	
■ No			•		
☐ Yes. I	Name of person			Attach Bankruptcy Petiti Declaration, and Signatu	
that they ar	true and correct. R. Mortensen	re that I have read the sum	x Sets	A Moeliumortensen	. ·
	re of Debtor 1		Signature of D		
Date ;	September 1, 2016	<u>) </u>	Date Septe	ember 1, 2016	

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Debtor 1 James R. Mortensen
Debtor 2 Esther C. Mortensen

Case number (if known)

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

James R. Mortensen Signature of Debtor 1

Date

September 1, 2016

Esther C. Mortensen Signature of Debtor 2

Date September 1, 2016

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Debtor 1 Debtor 2 James R. Mortensen Esther C. Mortensen

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 (Discourse de la contraction de
_					A LA COMPANIE CONTROL OF THE CONTROL OF T	non-filing	spouse
8.	Unemployment compensation			\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amo the Social Security Act. Instead, list it here:						
	For you		.00				
	For your spouse		.00				
	Pension or retirement income. Do not include any benefit under the Social Security Act.			\$	552.81	\$	0.00
10.	Income from all other sources not listed above. S Do not include any benefits received under the Social received as a victim of a war crime, a crime against had domestic terrorism. If necessary, list other sources of total below.	ll Security Act or payme numanity, or internations	nts al or				
				\$	0.00	\$	0.00
				\$	0.00	\$	0.00
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00
11.	Calculate your total current monthly income. Add each column. Then add the total for Column A to the	lines 2 through 10 for total for Column B.	\$	552.81	+ \$ _	0.00	= \$ 552.81
			L] [Total current monthly
Part	2: Determine Whether the Means Test Applies	s to You					income
12	Calculate your current monthly income for the year	E Follow those stone:					
12.		167		_			
	12a. Copy your total current monthly income from line	∍ 11		Copy	/ line 11 h	nere=>	\$ 552.81
	Multiply by 12 (the number of months in a year)						¥ 10
	• •	ilo a farma					x 12
	12b. The result is your annual income for this part of t	ine ionn				12b	s
13.	Calculate the median family income that applies to	o vou. Follow these ster	ps:				
	Fill in the state in which you live.	IL	,				
		, <u>,</u>					
	fill in the number of people in your household.	2					
	Fill in the median family income for your state and size Fo find a list of applicable median income amounts, goor this form. This list may also be available at the bar	o online using the link s	pecified i	n the separa	te instruct	13. ions	\$ 63,896.00
14.	low do the lines compare?						
	4a. Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, ch	eck box	1, There is n	o presum _i	ption of abus	e.
	4b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pre	sumption of	abuse is c	letermined by	y Form 122A-2.
art	Sign Below						
	By signing here, I declare under penalty of perjur	y that the information or	n this stat	ement and i	n any atta	chments is tr	ue and correct.
	varian // //		d a	1	W/_		
	James R. Mortensen	X_	ether C	. Mortens	age -	\sim	
	Signature of Debtor			of Debtor 2	EII		
	Date September 1, 2016	Date _§	Septemb	er 1, 2016	5		
	MM / DD / YYYY		/IM / DD	/ YYYY			
	If you checked line 14a, do NOT fill out or file For						
	If you checked line 14b, fill out Form 122A-2 and	tile it with this form.					

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United States Bankruptcy Court Northern District of Illinois

In re	Esther C. Mortensen		Case No.	
		Debtor(s)	Chapter	7
	•			
	VEI	RIFICATION OF CREDITOR M	IATRIX	
		Number of	f Creditors:	19
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credi	tors is true and	correct to the best of my
Date:	September 1, 2016	James R. Mortensen		
Date:	September 1, 2016	Signature of Debtor Esther C. Mortensen Signature of Debtor	u	

		Docume	<u>ni Page 13 0154</u>		
Fill in this infor	mation to identify your	case:			
Debtor 1	James R. Morten	sen			
	First Name	Middle Name	Last Name		
Debtor 2	Esther C. Morten	sen			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is a amended filing	n

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

-	•		
Par	t 1: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	55,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,472.20
	1c. Copy line 63, Total of all property on Schedule A/B	\$	66,472.20
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	70,726.80
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	10,354.33
	Your total liabilities	\$	81,081.13
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,317.31
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,278.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

D 1 ()		Document	Page 14 of 54	
	James R. Mortensen		_	
Debtor 2	Esther C. Mortensen		Case number (if known)	

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

552.81

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Ca	Se 10-62069	DOCI	_	09/02/16 ument	Page 15 of 54	.0 10.46.2	29 De:	SC Main
Fill	in this inform	nation to identify y	our case and th			1 (M.M. 1.) (M.)			
Deb	otor 1	James R. Mor	tensen						
		First Name	Middle	Name		Last Name			
	otor 2 use, if filing)	Esther C. Mor	tensen Middle	Name		Last Name			
		nkruptcy Court for th			RICT OF ILLIN				
Jill	eu States Dai	ikrupicy Court for tr	ie. NOITTIER	N DISTI	CIOT OF ILLII	1010			
Cas	se number					_			☐ Check if this is amended filing
									amended ming
Դf₁	ficial Ea	rm 106A/B							
_			rt						
		e A/B: Pro							12/15
nink	it fits best. Be	e as complete and ac	curate as possible	e. If two	married people	ın asset fits in more than one e are filing together, both are e top of any additional pages	equally respon	nsible for su	pplying correct
	ver every quest					o top or any additional pages	, ,		,
Part	1: Describe I	Each Residence, Buil	ding, Land, or Otl	her Real	Estate You Ow	n or Have an Interest In			
. Do	you own or h	ave any legal or equi	table interest in a	ny reside	ence, building,	land, or similar property?			
П	No. Go to Part			-					
	Yes. Where is	the property?							
1.1				What	is the property	/? Check all that apply			
	1103 Parks	side Drive			Single-family h		Do not deduc	ct secured cla	aims or exemptions. Put
	Street address, it	if available, or other descri	ption		Duplex or mult	ti-unit building	uilding the amount of any secured claims on S Creditors Who Have Claims Secured b		
					Condominium	or cooperative			, and a second
					Manufactured	or mobile home	Current valu	o of the	Current value of the
	Rockford	IL	61108-0000		Land		entire prope	erty?	portion you own?
	City	State	ZIP Code		Investment pro	operty	\$55	5,000.00	\$55,000.0
					Other				our ownership interest
				Who I	nas an interest	in the property? Check one	a life estate)		and by the entireties,
					Debtor 1 only		Fee simp	le	
	Winnebage	0			Debtor 2 only				
	County				Debtor 1 and [Debtor 2 only f the debtors and another	☐ Check i		nmunity property
						r the debtors and another ou wish to add about this iter	,	,	
					erty identification		, 54511 45 155		
_	A 46 4 - 11	an value of the most	·	all - f		mana Dant 4 to alcoller or	amtula - C-:		
		ar value of the port				rom Part 1, including any	entries for		\$55,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debto Debto	_	James R. Mor Esther C. Mor		Document Page 16 of 54	Case number (if known,)	
3. Ca	rs, vans	, trucks, tracto	rs, sport utility ve	hicles, motorcycles			
	No						
•	Yes						
3.1	Make: Model:	Toyota Corolla		Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of an	cured claims or exemptions y secured claims on Sched ave Claims Secured by Pro	ule D:
		2010 mate mileage: formation:	125,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of entire property?		
				☐ Check if this is community property (see instructions)	\$5,00	0.00 \$5,0	00.00
	ld the d			n for all of your entries from Part 2, including that number here		\$5,000	0.00
Dowt 0	- Dans	:h - V D	al and Harrack ald Mr				
			al and Household Ite gal or equitable int	ems terest in any of the following items?		Current value of portion you owr Do not deduct se claims or exempt	n? cured
Ex	<i>amples:</i> No	I goods and fui Major appliance escribe		china, kitchenware			
			room table and	s; 1 love seat; 2 end tables; 1 papasan; c chairs; coffee pot; toaster oven; bedroor chair; 2 curio cabinets; display shelving; old articles	n	\$2,	000.00
Ex	No	Televisions and		eo, stereo, and digital equipment; computers, prin ledia players, games	ters, scanners; music	collections; electronic de	evices
				uter; 2 TVs; 2 DVD/DVR players; acoustic 2 laptops; mobile phones	guitar;	\$1,	800.00
Ex			gurines; paintings, ns, memorabilia, co	prints, or other artwork; books, pictures, or other a	art objects; stamp, coir	n, or baseball card collec	ctions;
9. Eq	Yes. De	escribe t for sports and Sports, photogi musical instrun	raphic, exercise, an	d other hobby equipment; bicycles, pool tables, g	olf clubs, skis; canoes	and kayaks; carpentry t	tools;

	Case 16-8	32089	Doc 1	Filed 09/02/16 Document	Entered 09/02/16 10:48:29 Page 17 of 54	Desc Main
Debtor 1 Debtor 2	James R. Mo Esther C. Mo			Boodinone	Case number (if known)	
☐ Yes.	Describe					
10. Firearr		ehotaune	ammunition	, and related equipmen		
■ No	0/63. 1 13:013, 111163	, snotguns	, ammuniton	i, and related equipment	•	
☐ Yes.	Describe					
□ No [′]	oles: Everyday clo	thes, furs,	leather coats	s, designer wear, shoes	, accessories	
■ Yes.	Describe					
		Everyda	ay clothing			\$500.00
□ No		velry, costi	ume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, gems,	gold, silver
		Costum	e jewelry			\$200.00
14. Any ot	Describe her personal and Give specific info	ormation			ncluding any health aids you did not list crutches; 3 canes; CPAP	\$500.00
-						
				om Part 3, including a	ny entries for pages you have attached	\$5,000.00
	scribe Your Financ					
Do you ov	vn or have any le	egal or equ	uitable intere	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No		•		our home, in a safe depo	osit box, and on hand when you file your petit	ion
					Cash	\$300.00
				I accounts; certificates of ounts with the same ins	of deposit; shares in credit unions, brokerage titution, list each.	houses, and other similar
				Institution r	name:	
		17.1	Checking	PNC Ban	k	\$72.00

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		17.2.	Savings	PNC Bank	\$9.20
			cly traded stocks ent accounts with	brokerage firms, money market accounts	
			Institution or issu	er name:	
	ublicly traded sto enture	ock and	interests in inco	rporated and unincorporated businesses, including an intere	est in an LLC, partnership, and
■ No □ Yes.	Give specific info		about them me of entity:		
Negot	iable instruments	include ¡	personal checks, o	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	Give specific info	rmation	about them		
	·		uer name:		
	ment or pension ples: Interests in I			, 403(b), thrift savings accounts, or other pension or profit-sharin	g plans
Yes.	List each accoun		tely. of account:	Institution name:	
		Pens	sion	Monthly Greyhound pension interest	\$552.00
Exam _l □ No				so that you may continue service or use from a company it, public utilities (electric, gas, water), telecommunications company Institution name or individual:	anies, or others
		Rent	al deposit	Landlord security deposit	\$300.00
		Elec	tric	ComEd security deposit	\$138.00
23. Annuit	ies (A contract fo	r a perio	dic payment of mo	oney to you, either for life or for a number of years)	
☐ Yes	Iss	suer nam	ne and description		
	ts in an educatio C. §§ 530(b)(1), 5			qualified ABLE program, or under a qualified state tuition p	rogram.
☐ Yes	Ins	stitution i	name and descript	ion. Separately file the records of any interests.11 U.S.C. § 521(o	:):
■ No	, equitable or fut			(other than anything listed in line 1), and rights or powers ex	xercisable for your benefit
	•				
				and other intellectual property eeds from royalties and licensing agreements	
	Give specific info	ormation	about them		

Official Form 106A/B Schedule A/B: Property page 4

5.1.4	Isaasa B. Maatsassa	Document	Page 19 of 54		
Debtor 1 Debtor 2	James R. Mortensen Esther C. Mortensen			Case number (if known)	
	es, franchises, and other genera		n holdings, liquor licen	ses, professional licenses	
	Give specific information about the	em			
Money or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	funds owed to you Give specific information about the	m, including whether you alre	ady filed the returns ar	nd the tax years	
■ No	support oles: Past due or lump sum alimony Give specific information	r, spousal support, child suppo	ort, maintenance, divoi	rce settlement, property set	ttlement
Examp	amounts someone owes you bles: Unpaid wages, disability insur benefits; unpaid loans you ma		efits, sick pay, vacation	n pay, workers' compensa	tion, Social Security
		otential claim for social s troactive benefits	security/disability b	penefits including	Unknown
	ets in insurance policies oles: Health, disability, or life insura	nce; health savings account (HSA); credit, homeowi	ner's, or renter's insurance	
■ Yes.	Name the insurance company of e Company na		Beneficia	ry:	Surrender or refund value:
	Knights of policy	f Columbus life insurance	e Wife		\$100.00
		Omaha whole life policy death benefit	with Wife		\$1.00
	Country Ir	surance whole life life p	olicy Husban	d	\$0.00
	Lincoln Ho policy	eritage final arrangement	s Husban	d	\$0.00
If you a some o	terest in property that is due you are the beneficiary of a living trust, one has died. Give specific information			currently entitled to receive	property because
Examµ □ No -	against third parties, whether oples: Accidents, employment disput Describe each claim			for payment	

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Debtor 1 James R. Mortensen Debtor 2 Esther C. Mortensen Case number (if known) Potential claim for breach of payment under catastrophic Unknown health coverage policy against Chesapeak Insurance 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,472.20 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2		\$55,000.00
56. Part 2: Total vehicles, line 5	\$5,000.00	
57. Part 3: Total personal and household items, line 15	\$5,000.00	

\$1,472.20

59. Part 5: Total business-related property, line 45

60. Part 6: Total farm- and fishing-related property, line 52

61. Part 7: Total other property not listed, line 54

4 \$0.00

. **Total personal property.** Add lines 56 through 61... \$11,472.20 Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$66,472.20

\$11,472.20

Official Form 106A/B Schedule A/B: Property page 6

Part 4: Total financial assets, line 36

		IAAAIIII	311 1 MM. 7 1 M 37	
Fill in this infor	rmation to identify your	case:		
Debtor 1	James R. Morten	sen		
	First Name	Middle Name	Last Name	
Debtor 2	Esther C. Morten	sen		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(II KNOWN)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	art 1: Identify the Property You Claim as Exempt
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2010 Toyota Corolla 125,000 miles	\$5,000.00		\$4,800.00	735 ILCS 5/12-1001(c)
Line Holli Golledale PAB. 9.1			100% of fair market value, up to any applicable statutory limit	
Desk; 2 recliners; 1 love seat; 2 end tables; 1 papasan; dining room table	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)
and chairs; coffee pot; toaster oven; bedroom furniture; desk chair; 2 curio cabinets; display shelving; and other random household articles Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Personal computer; 2 TVs; 2 DVD/DVR players; acoustic guitar;	\$1,800.00		\$1,800.00	735 ILCS 5/12-1001(b)
digital camera; 2 laptops; mobile phones Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Everyday clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
Line from Goriedate AVD. 11.1			100% of fair market value, up to any applicable statutory limit	

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James R. Mortensen Debtor 1 Esther C. Mortensen Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2 nebulizers; 1 walker; shower chair; 735 ILCS 5/12-1001(b) \$500.00 \$500.00 crutches; 3 canes; CPAP 100% of fair market value, up to Line from Schedule A/B: 14.1 any applicable statutory limit **Checking: PNC Bank** 735 ILCS 5/12-1001(b) \$72.00 \$72.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: PNC Bank 735 ILCS 5/12-1001(b) \$9.20 \$9.20 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Pension: Monthly Greyhound** 735 ILCS 5/12-1006 \$552.00 \$552.00 pension interest Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Potential claim for social 305 ILCS 5/11-3 \$0.00 Unknown security/disability benefits including retroactive benefits 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 30.1

3.	•	claiming a homestead exemption of more than \$160,375? o adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.
	Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
		No Yes

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Fill in this information to identify yo		()1 .) 4		
Debtor 1 James R. Mort	ensen			
First Name	Middle Name Last Name			
Debtor 2 Esther C. Mort	ensen			
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the	e: NORTHERN DISTRICT OF ILLINOIS			
Case number				
(if known)			☐ Check	if this is an
			ameno	ded filing
Official Form 106D				
Official Form 106D				
Schedule D: Creditor:	s Who Have Claims Secured	by Propert	у	12/15
	. If two married people are filing together, both are equ tout, number the entries, and attach it to this form. On			
. Do any creditors have claims secured I	by your property?			
\square No. Check this box and submit	this form to the court with your other schedules. Yo	u have nothing else t	o report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
	more than one secured claim, list the creditor separately	Column A	Column B	Column C
	as a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Chase	Describe the property that secures the claim:	\$70,726.80	\$55,000.00	\$15,726.80
Creditor's Name	1103 Parkside Drive Rockford, IL 61108 Winnebago County			
PO Box 9001871	As of the date you file, the claim is: Check all that apply.			
Louisville, KY 40290-1871	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secundary)	ıred		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 6144			
-	Column A on this page. Write that number here:	\$70,72	26.80	
If this is the last page of your form, add	d the dollar value totals from all pages.	\$70,72	26.80	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

		Document	Page 24 of 54	
Fill in this info	ormation to identify your case:			
Debtor 1	James R. Mortensen			
	First Name Mid	dle Name	Last Name	
Debtor 2 (Spouse if, filing)	Esther C. Mortensen First Name Mid	dle Name	Last Name	
United States I	Bankruptcy Court for the: NORTH	ERN DISTRICT OF IL	LLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 106E/F			
	E/F: Creditors Who Ha	ve Unsecured	d Claims	12/15
			ITY claims and Part 2 for creditors with NON	
Schedule G: Exe Schedule D: Cre left. Attach the C	ecutory Contracts and Unexpired Lease ditors Who Have Claims Secured by Pro- continuation Page to this page. If you ha	s (Official Form 106G). operty. If more space is	list executory contracts on Schedule A/B: F Do not include any creditors with partially s s needed, copy the Part you need, fill it out, eport in a Part, do not file that Part. On the t	secured claims that are listed in number the entries in the boxes on the
	number (if known).	Claima		
	All of Your PRIORITY Unsecured ditors have priority unsecured claims a			
No. Go to		gumst your		
☐ Yes.	o Fait 2.			
	All of Your NONPRIORITY Unsecu	red Claims		
	ditors have nonpriority unsecured claim			
_ `	have nothing to report in this part. Submit	• •	h vour other achedules	
_	have nothing to report in this part. Submit	this form to the court with	n your other schedules.	
Yes.				
unsecured c	laim, list the creditor separately for each c	laim. For each claim liste	the creditor who holds each claim. If a credit ed, identify what type of claim it is. Do not list cla have more than three nonpriority unsecured c	aims already included in Part 1. If more
				Total claim
4.1 Alan	S. Kaufman	Last 4 digits of ac	count number	\$0.00
•	ority Creditor's Name	_		
	East Wacker Drive, Suite 1250 1go, IL 60601	When was the deb	ot incurred?	
Numbe	r Street City State Zlp Code	As of the date you	u file, the claim is: Check all that apply	
Who in	curred the debt? Check one.			
☐ Deb	otor 1 only	☐ Contingent		
☐ Deb	otor 2 only	☐ Unliquidated		
Deb	otor 1 and Debtor 2 only	☐ Disputed		
☐ At le	east one of the debtors and another		RITY unsecured claim:	
	eck if this claim is for a community	Student loans		
debt Is the o	claim subject to offset?	Obligations aris report as priority cla	sing out of a separation agreement or divorce th	at you did not
■ No			on or profit-sharing plans, and other similar debt	ts
_ 110		2 2 12 12 F 211010	NOTICE ONLY - Attorney for JP N	
☐ Yes		Other. Specify	Chase Bank, 2016 CH 339	···· 3-···

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Debt	or 2 Esther C. Mortensen	Case number (if know)	
4.2	Capital One Retail Services	Last 4 digits of account number 7308	\$151.56
	Nonpriority Creditor's Name		
	PO Box 71106 Charlotte, NC 28272-1106	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	_ ,		
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Menard's card	
4.3	Cardmember Service Nonpriority Creditor's Name	Last 4 digits of account number 4182	\$460.04
	P.O. Box 15153 Wilmington, DE 19886-5153	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card	
4.4	Citi Cards Nonpriority Creditor's Name	Last 4 digits of account number 4660	\$1,440.65
	PO Box 78045	When was the debt incurred?	
	Phoenix, AZ 85062-8045		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card	

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Debtor	Esther C. Mortensen	Case number (if know)	
4.5	ComEd Nonpriority Creditor's Name	Last 4 digits of account number 2370	\$375.57
	P.O. Box 6111 Carol Stream, IL 60197-6111	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Utilities owed for 1103 Parkside Drive, Rockford, IL 61108	
4.6	Greensky	Last 4 digits of account number 2809	\$2,212.00
	Nonpriority Creditor's Name PO Box 29429	When was the debt incurred?	
	Atlanta, GA 30359 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, and the graine, and the most an example,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Loan for insulation improvements	
4.7	Health Alliance	Last 4 digits of account number 0101	\$318.30
	Nonpriority Creditor's Name 301 S. Vine Street	When was the debt incurred?	
	Urbana, IL 61801 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 or and talle you me, and disamine of look an what apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Health insurance premiums	

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Debt	tor 2 Esther C. Mortensen	Case number (if know)	
4.8	Nicor	Last 4 digits of account number 5194	\$195.77
	Nonpriority Creditor's Name PO Box 5407 Carol Stream, IL 60197-5407	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Utilities owed for 1103 Parkside Drive, Rockford, IL 61108	
4.9	Payment Center	Last 4 digits of account number 5973	\$145.15
	Nonpriority Creditor's Name City of Rockford PO Box 4635	When was the debt incurred?	
	Carol Stream, IL 60197-4635 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts Utilities owed for 1103 Parkside Drive, Rockford, IL 61108	
4.1	Rockford Health Physicians	Last 4 digits of account number A395	\$118.38
0	Nonpriority Creditor's Name Department 4701	When was the debt incurred?	<u> </u>
	Carol Stream, IL 60122-4701 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical bills	

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2 Esther C. Mortensen	Case number (if know)	
Rockford Health Physicians Nonpriority Creditor's Name Department 4701	Last 4 digits of account number When was the debt incurred?	\$102.5
Carol Stream, IL 60122-4701 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dami is. Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical bills	
Rockford Mercantile Agency, Inc.	Last 4 digits of account number	\$1,656.2
Nonpriority Creditor's Name 2502 S. Alpine Road	When was the debt incurred?	, ,
Rockford, IL 61108 Number Street City State Zlp Code	As of the date you file the claim in Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Springleaf Financial	Last 4 digits of account number 8334	\$960.0
Nonpriority Creditor's Name P.O. Box 790368	When was the debt incurred?	
Saint Louis, MO 63179-0368 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	

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Debtor 1 Debtor 2	James R. Mortensen Esther C. Mortensen	Case number (if know)	
4.1	Sprint	Last 4 digits of account number	\$1,009.10
	Nonpriority Creditor's Name		
	P.O. Box 4191 Carol Stream, IL 60197-4191	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
,	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Synchrony Bank	Last 4 digits of account number 7948	\$695.77
	Nonpriority Creditor's Name PO Box 9600061	When was the debt incurred?	
	Orlando, FL 32896-0061 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Lenscrafters	
	Synchrony Bank	Last 4 digits of account number 0575	\$280.87
	Nonpriority Creditor's Name PO Box 9600061 Orlando, FL 32896-0061	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify CareCredit	

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Debto Debto	r 1 James R. Mortensen r 2 Esther C. Mortensen	Case number (if know)	
4.1 7	Synchrony Bank	Last 4 digits of account number 4362	\$232.34
	Nonpriority Creditor's Name PO Box 9600061	When was the debt incurred?	
	Orlando, FL 32896-0061 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other Specify Farm & Fleet credit card	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					<u>.</u>
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	01	On the other con-	01		Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	•	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	10,354.33
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	10,354.33

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		I A A A HI I II	311 1 11(11, 3) 1 (11, 3) 4
Fill in this infor	mation to identify your	case:	
Debtor 1	James R. Morten	sen	
	First Name	Middle Name	Last Name
Debtor 2	Esther C. Morten	sen	
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS
Case number			
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Edward Rose & Sons
38525 Woodward Ave
Bloomfield Hills, MI 48304

State what the contract or lease is for
Residential apartment lease for 5041 Linden Road, Apt.
11202, Rockford, IL

		Docume	ent Page 32 d	ot 54	
Fill in this	s information to identify your	case:			
Debtor 1	James D. Marten	000			
Depioi i	James R. Morten First Name	Middle Name	Last Name		
Debtor 2	Esther C. Morten	sen			
(Spouse if, fill		Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Ormod On	atoo Barinaptoy Court for the.		0		
Case num	ber				
(if known)				Check if this is an	
				amended filing	
Officia	l Form 106H				
		la la Cama			
Sched	dule H: Your Cod	eptors		12/15	,
	e and case number (if known you have any codebtors? (If			e as a codebtor.	
■ No □ Yes					
	thin the last 8 years, have you na, California, Idaho, Louisiana			ry? (Community property states and territories include ington, and Wisconsin.)	
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offic 06G). Use Schedule D, Schedule E/F, or Schedule G to	ial
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the deb Check all schedules that apply:	t
2.1				☐ Schedule D. line	
3.1	Name				
				☐ Schedule E/F, line	
				Scriedule G, line	
	Number Street City	State	ZIP Code		
					_
3.2				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your o	case:							
De	btor 1 James R. M	ortensen							
1	btor 2 Esther C. M	ortensen			_				
Uni	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS						
	se number nown)		-				led filing nent showir	ng postpetition	
<u>O</u>	fficial Form 106l					MM / DD/	YYYY		
S	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Telescribe Employment Fill in your employment information.	ur spouse is not filing w On the top of any additi	ith you, do not inclu	ıde infor	mati	on about your sp d case number (i	oouse. If m f known). A	ore space is	needed,
			☐ Employed			□ Emp		iiiig spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Not employed			_ `	employed		
	employers.	Occupation	Retired			Retire	d		
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	rt 2: Give Details About Mo	nthly Income							
spo If yo	imate monthly income as of the cuse unless you are separated. ou or your non-filing spouse have m	ore than one employer, co	,	·			•	•	J
mor	e space, attach a separate sheet to	this form.				For Debtor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	\$	0.00	

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	otor 1 otor 2	James R. Mortensen Esther C. Mortensen	_		Case	number (if k	now	n)					
					Fo	r Debtor 1				or Debtor on-filing s			
	Сор	by line 4 here	4.		\$	-	0.0	0	\$			0.00	-
5.	List	all payroll deductions:											
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$		0.0	0	\$			0.00	
	5b.	Mandatory contributions for retirement plans	5b	٥.	\$		0.0	0	\$			0.00	-
	5c.	Voluntary contributions for retirement plans	50	.	\$_	(0.0	0	\$			0.00	
	5d.	Required repayments of retirement fund loans	50		\$_		0.0	0	\$			0.00	_
	5e.	Insurance	5e		\$_		0.0	_	\$_		_	0.00	
	5f.	Domestic support obligations	5f		\$_		0.0		\$_			0.00	-
	5g.	Union dues	50		\$_ \$		0.0		. \$. r			0.00	-
_	5h.	Other deductions. Specify:		1.+	-				+ \$			0.00	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _		0.0		\$			0.00	-
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_		0.0	0	\$			0.00	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total											
		monthly net income.	88	a.	\$_	(0.0	0	\$			0.00	_
	8b.	Interest and dividends	8b	ο.	\$_		0.0	0	\$			0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	t 80	c .	\$		0.0	0	\$			0.00	
	8d.	Unemployment compensation	80	d.	\$		0.0	0	\$			0.00	.
	8e.	Social Security	86	€.	\$_	1,88	9.7	0	\$		87	74.80	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f		\$	1	0.0	0	\$			0.00	
	8g.	Pension or retirement income	8g		\$	55	2.8	1	\$			0.00	
	8h.	Other monthly income. Specify:	8h	1.+	\$_	-	0.0	0	+ \$			0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	2,44	2.5	1	\$_		8	374.80	D
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,442.51	1.	\$		874.80	1_	\$	3 317 31
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		2,442.51	†			074.00	-	-	3,317.31
11.	Inclu othe	te all other regular contributions to the expenses that you list in <i>Schedula</i> ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r depe						•				0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies									9	\$	3,317.31
13.	Do y	you expect an increase or decrease within the year after you file this forn	n?								_	ombir nonthly	ned y income
		No.									_		
	П	Yes. Explain:											

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Fill	in this informa	ation to identify y	our case:					
Deb	tor 1	James R. Mo	ortensen			Ch	eck if this is:	
							An amended filing	
	tor 2	Esther C. Mo	ortensen					wing postpetition chapter the following date:
(Spc	ouse, if filing)						rs expenses as or	the following date.
Unite	ed States Bankr	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e numbe r nown)							
Of	fficial Fo	rm 106J						
Sc	hedule	J: Your	Exner	1606				12/1
Be a	as complete a ormation. If m mber (if know	and accurate as	s possible eded, atta ry questio	. If two married people ar ach another sheet to this				
1.	Is this a joir		Jilolu					
	□ No. Go to							
	_		in a separ	ate household?				
	■ N		•					
			st file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ehtor 2	
		00. D00.01 2 111d	01110	iai i 01111 1000 2, 2 <i>xpon</i> 000	Tor Coparato Frodo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	Do your exp	penses include		l _{No}				— 103
		f people other t	than _	l Yes				
	yoursen and	d your depende	ints r —					
exp	imate your ex	a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
4.		or home owners		nses for your residence. In or lot.	nclude first mortgag	e 4.	\$	580.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner'				4b.		15.00
				upkeep expenses		4c.		10.00
5		owner's associa		dominium dues our residence , such as ho	me equity loops	4d. 5.	· -	0.00

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Debtor 1 Debtor 2		Case number (if known)	
S. Uti	lities:		
6a.	Electricity, heat, natural gas	6a. \$	115.00
6b.	Water, sewer, garbage collection	6b. \$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	165.00
6d.	Other. Specify:	6d. \$	0.00
. Fo	od and housekeeping supplies	7. \$	550.00
	ildcare and children's education costs	8. \$	0.00
. Clo	othing, laundry, and dry cleaning	9. \$	100.00
0. Pe	rsonal care products and services	10. \$	25.00
	dical and dental expenses	11. \$	200.00
	insportation. Include gas, maintenance, bus or train fare.	· -	
	not include car payments.	12. \$	425.00
3. En	tertainment, clubs, recreation, newspapers, magazines, and books	13. \$	80.00
4. Ch	aritable contributions and religious donations	14. \$	155.00
	urance.		
	not include insurance deducted from your pay or included in lines 4 or 20.		
	a. Life insurance	15a. \$	144.00
_	b. Health insurance	15b. \$	630.00
	c. Vehicle insurance	15c. \$	84.00
	d. Other insurance. Specify:	15d. \$	0.00
Sp	kes. Do not include taxes deducted from your pay or included in lines 4 or 20 ecify:). 16. \$	0.00
	tallment or lease payments:	47 0	
	a. Car payments for Vehicle 1	17a. \$	0.00
	c. Car payments for Vehicle 2	17b. \$	0.00
	c. Other. Specify:	17c. \$	0.00
	d. Other. Specify:	17d. \$	0.00
	ur payments of alimony, maintenance, and support that you did not rep		0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form	106i). 10. \$ \$	0.00
	ner payments you make to support others who do not live with you.	*	0.00
	ecify: ner real property expenses not included in lines 4 or 5 of this form or or	19.	
	a. Mortgages on other property	20a. \$	0.00
	b. Real estate taxes	20b. \$	0.00
	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	Homeowner's association or condominium dues	20d. \$ 20e. \$	0.00
_		21. +\$	
	ner: Specify:	21. +5	0.00
	Iculate your monthly expenses		
	a. Add lines 4 through 21.	\$	3,278.00
221	o. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 10)6J-2 \$	
220	c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,278.00
	culate your monthly net income.		J
238	a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,317.31
23	Copy your monthly expenses from line 22c above.	23b\$	3,278.00
230	 Subtract your monthly expenses from your monthly income. The result is your monthly net income. 	23c. \$	39.31
For	you expect an increase or decrease in your expenses within the year a example, do you expect to finish paying for your car loan within the year or do you expedification to the terms of your mortgage? No.		or decrease because of a
	Yes Explain here:		

Fill in this infor	mation to identify your	case:		
Debtor 1	James R. Morten	sen		
	First Name	Middle Name	Last Name	_
Debtor 2	Esther C. Mortens	sen		
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS	_
Case number				
(if known)				☐ Check if this is an amended filing
Official Form		ın Individua	l Debtor's Schedule	S 12/15
years, or both. 1	8 U.S.C. §§ 152, 1341, 1		kruptcy case can result in fines up to \$,
Did you pa	y or agree to pay some	one who is NOT an atto	rney to help you fill out bankruptcy for	ms?
■ No				
☐ Yes. I	Name of person			ch Bankruptcy Petition Preparer's Notice,
			Decis	aration, and Signature (Official Form 119)
	alty of perjury, I declare te true and correct.	that I have read the sur	nmary and schedules filed with this dec	claration and
X /s/ Jan	nes R. Mortensen		X /s/ Esther C. Mortensen	
	R. Mortensen		Esther C. Mortensen	-
Signatu	re of Debtor 1		Signature of Debtor 2	
Date _	September 2, 2016		Date September 2, 20	16

Fill	in this inform	nation to identify you	r case:			
	btor 1	James R. Morte				
	DIOI I	First Name	Middle Name	Last Name		
1 -	btor 2	Esther C. Morte				
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Ca	se number					
(if kı	nown)					Check if this is an
						amended filing
<u>Of</u>	ficial For	rm 107				
St	atement	of Financial	Affairs for Individ	duals Filing for B	Bankruptcy	4/1
info	rmation. If monber (if known	ore space is needed). Answer every que	ible. If two married people a attach a separate sheet to stion. arital Status and Where You	this form. On the top of an		
				Lived Belole		
1.	what is your	current marital stati	18 ?			
	Married					
	☐ Not mari	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. List	t all of the places you	lived in the last 3 years. Do n	ot include where you live nov	v.	
	Debtor 1 Pri	ior Address:	Dates Debtor 1	Debtor 2 Prior Ac	ddress:	Dates Debtor 2
	4400 Daules	da Dalaa	lived there	_		lived there
	1103 Parks Rockford,		From-To: June 2004	Same as Debtor	1	Same as Debtor 1 From-To:
	rtookiora,	12 01100	through			FIOTH-TO:
			September 20)15		
3. stat	es and territorion No Yes. Mal	es include Arizona, Ca	ver live with a spouse or legalifornia, Idaho, Louisiana, New hedule H: Your Codebtors (Our Income	vada, New Mexico, Puerto R		
4.	Did you have	e any income from e	mployment or from operatir	ng a business during this y	ear or the two previous cal	endar years?
			ou received from all jobs and a have income that you receive			-
	■ No					
	_	in the details.				
			5 14		D.1.	
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

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						Docume	nt F	Page 39 of 54	ļ		
		_	nes R. Mo her C. Mo					Cas	se number (if known)		
5.	Include and oth	e inc her p	ome regard oublic benef	lless of wheth fit payments;	er that inco pensions; re	me is taxable. Exental income; inte	xamples c erest; divi		alimony; child sup cted from lawsuits	; royalties;	al Security, unemployment, and gambling and lottery
	List ead	ch s	ource and t	he aross inco	me from ea	ch source separ	atelv. Do	not include income	that vou listed in li	ne 4.	
	□ No			g			,. = -		,		
		-	Fill in the de	etails.							
					5 17 4				5.1.		
					Debtor 1 Sources of Describe b		each (befo	s income from source re deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
			1 of curre led for bar	nt year until nkruptcy:	Social Solution	ecurity		\$15,117.60	Social Secu Income	rity	\$6,998.40
					Retireme	ent Income		\$4,422.48			
	or last ca anuary 1		dar year: December	31, 2015)	Social Solution	ecurity		\$22,298.40	Social Secu Income	rity	\$10,497.60
					Retireme	ent Income		\$6,663.72			
			ar year be December		Social Solution	ecurity		\$22,298.40	Social Secu Income	rity	\$10,497.60
					Retireme	ent Income		\$6,663.72			
Pa	art 3:	List	Certain Pa	yments You	Made Befo	re You Filed for	r Bankrup	otcy			
6.	Are eit □ No		Neither De	ebtor 1 nor D	ebtor 2 ha	imarily consume s primarily cons amily, or househ	sumer de	bts. Consumer deb	ts are defined in 1	1 U.S.C. §	101(8) as "incurred by an
			During the	90 days befo	re you filed	for bankruptcy, o	did you pa	y any creditor a tota	al of \$6,425* or mo	ore?	
				Go to line 7							
			☐ Yes	paid that cr	editor. Do n		ents for do	mestic support obli			nd the total amount you ort and alimony. Also, do
			* Subject	to adjustmen	t on 4/01/19	and every 3 year	ırs after th	at for cases filed or	or after the date	of adjustm	ent.
	■ Ye	es.				e primarily cons for bankruptcy, o		ots. ly any creditor a tota	al of \$600 or more	?	
			□ No.	Go to line 7							
			■ Yes		ments for d	omestic support					that creditor. Do not not not include payments to an
	Credit	tor's	Name and	d Address		Dates of paym	ent	Total amount paid	Amount you still owe	Was th	is payment for
	РО В	ox :		Shield of IL 66-7238		July 2016		\$1,000.00	\$0.00	☐ Mor	dit Card
										☐ Loai	n Repayment

☐ Suppliers or vendors

defaults

■ Other_Insurance premium

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Case number (if known

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address Dates of payment** Total amount Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address **Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number JP Morgan Chase Bank, N.A. v. Residential Winnebago County Court Pending James R. Mortenson, et al. foreclosure action 400 W. State Street □ On appeal 2016 CH 339 Rockford, IL 61101 ☐ Concluded 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Amount Date action was 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes

Debtor 1

Debtor 2

James R. Mortensen

Esther C. Mortensen

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	otor 2 Esther C. Mortensen	Case number	er (if known)					
Par	t 5: List Certain Gifts and Contributions							
		otcy, did you give any gifts with a total value of more	than \$600 per person	?				
	Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
	Holy Family Church 4401 Highcrest Rd Rockford, IL 61107	\$25.00 per week	Weekly	\$860.00				
	Person's relationship to you: Debtors' church							
4.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No □ Yes. Fill in the details for each gift or contribution.							
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value				
Par	tt 6: List Certain Losses							
5.	Within 1 year before you filed for bankrupt or gambling?	cy or since you filed for bankruptcy, did you lose an	ything because of thef	t, fire, other disaster				
	☐ Yes. Fill in the details.							
		escribe any insurance coverage for the loss	Date of your	Value of property				
		nclude the amount that insurance has paid. List pending a surance claims on line 33 of Schedule A/B: Property.	loss	lost				
Par	t 7: List Certain Payments or Transfers							
6.	consulted about seeking bankruptcy or pro	cy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? parers, or credit counseling agencies for services requires.		rty to anyone you				
	□ No■ Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	BARRICK SWITZER LAW OFFICE 6833 Stalter Drive Rockford, IL 61108	Attorney Fees/filing fee	August 2016	\$1,135.00				

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Debtor 1 James R. Mortensen
Debtor 2 Esther C. Mortensen

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.						
	No No						
	Yes. Fill in the details.						
	Person Who Was Paid Address	Description and value transferred	alue of any prope	rty Date payment or transfer was made	Amount of payment		
18	Within 2 years before you filed for bankruptc	v did vou sell trade o	or otherwise transf	fer any property to anyone oth	er than property		
	transferred in the ordinary course of your but Include both outright transfers and transfers may include gifts and transfers that you have already No	siness or financial affa de as security (such as	airs? the granting of a sec				
	Yes. Fill in the details.						
	Person Who Received Transfer	Description and	ralua of	Describe any property or	Date transfer was		
	Address		Description and value of Desc property transferred paym paid		made		
	Person's relationship to you						
	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)						
	No						
	Yes. Fill in the details.						
	Name of trust	Description and v	alue of the proper	ty transferred	Date Transfer was made		
Par	8: List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and Stora	ge Units			
	Within 1 year before you filed for bankruptcy sold, moved, or transferred?	•			,		
	Include checking, savings, money market, or houses, pension funds, cooperatives, associ No			deposit; snares in banks, cred	iit unions, brokerage		
	Yes. Fill in the details.						
	Name of Financial Institution and	Last 4 digits of	Type of account	or Date account was	Last balance		
		account number	instrument	closed, sold, moved, or transferred	before closing or transfer		
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?		
22.	Have you stored property in a storage unit or	r place other than you	home within 1 yea	ar before you filed for bankrup	tcy?		
	■ No						
	Yes. Fill in the details.						
	Name of Storage Facility	Who else has or l	had access De	escribe the contents	Do you still		
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, State and ZIP Code)		see. Se the contents	have it?		
		Julio and Eli Gode)					

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Debtor 1 James R. Mortensen
Debtor 2 Esther C. Mortensen

Case number (if known)

Par	t 9: Identify Property You Hold or Control for S	Someone Else						
23.	Do you hold or control any property that someone for someone.	ne else owns? Include any proper	rty yo	ou borrowed from, are storing fo	r, or hold in trust			
	No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value			
Par	t 10: Give Details About Environmental Informa	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environr hazardous material, pollutant, contaminant, or s		s was	ste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	n the	y occurred.				
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	a und	ler or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adminis	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No							
	Yes. Fill in the details.	_						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case			
Par	t 11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, d	did you own a business or have ar	ny of	the following connections to an	y business?			
	☐ A sole proprietor or self-employed in a to	•	•	J				
	☐ A member of a limited liability company	•		•				
	☐ A partner in a partnership	• • • • • • • • • • • • • • • • • • • •	. `	•				
	☐ An officer, director, or managing executi	ive of a corporation						
	☐ An owner of at least 5% of the voting or	-						

Case 16-82089 Doc 1 Filed 09/02/16 Entered 09/02/16 10:48:29 Desc Main Page 44 of 54 Document Debtor 1 James R. Mortensen Debtor 2 Esther C. Mortensen Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ James R. Mortensen /s/ Esther C. Mortensen James R. Mortensen Esther C. Mortensen Signature of Debtor 1 Signature of Debtor 2 Date September 2, 2016 Date September 2, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

☐ Yes. Name of Person

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Fill in this informa	tion to identify your	case:		
Debtor 1	James R. Mortens			
Dahtano	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Esther C. Mortens	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	NORTHERN DIST	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
				•
Official Forn	n 108			
Statement	of Intentio	n for Indiv	iduals Filing Under Chapte	er 7
If you are an individ	dual filing under chap	otor 7 you must fill	Lout this form if:	
	laims secured by you	. •	rout this form ii.	
	personal property a			
	r is earlier, unless th		you file your bankruptcy petition or by the date s e time for cause. You must also send copies to th	
	ole are filing together date the form.	in a joint case, bo	th are equally responsible for supplying correct i	nformation. Both debtors must
	d accurate as possib r name and case nun		needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Your	r Creditors Who Have	Secured Claims		
			: Creditors Who Have Claims Secured by Propert	v (Official Form 106D), fill in the
information belo	•		What do you intend to do with the property tha	,
identity the electric	tor and the property to	iat io conditional	secures a debt?	as exempt on Schedule C?
Creditor's Cha	ise		Surrender the property.	□No
name:			Retain the property and redeem it.	■ Yes
•	1103 Parkside Driv	,	☐ Retain the property and enter into a Reaffirmation Agreement.	— 103
property I securing debt:	L 61108 Winneba	go County	☐ Retain the property and [explain]:	
securing debt.				
	r Unexpired Personal		in Schedule G: Executory Contracts and Unexpir	ad Leases (Official Form 106G) fill
in the information b	below. Do not list rea	l estate leases. Un	expired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)	ne lease period has not yet ended.
Describe your une	xpired personal prop	erty leases		Will the lease be assumed?
Lessor's name:	Edward Rose	& Sons		□ No
				■ Yes
Description of lease Property:	ed Residential ap IL	artment lease for	r 5041 Linden Road, Apt. 11202, Rockford,	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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			d my intention about any property of my estate that secures a debt and any personal	
pro	perty that i	is subject to an unexpired lease.		
X	/s/ Jam	es R. Mortensen	X /s/ Esther C. Mortensen	
X		es R. Mortensen R. Mortensen	X /s/ Esther C. Mortensen Esther C. Mortensen	
X	James			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-82089 Doc 1 Filed 09/02/16 Entered 09/02/16 10:48:29 Desc Main Document Page 51 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In 1	James R. Mortensen Esther C. Mortensen		Case No.		
	Edition of Mortonicon	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATTOI	DNEV EAD DE	PTOD(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of the debtor of the d	of the petition in bankruptcy,	or agreed to be paid	to me, for services rer	ndered or to
	For legal services, I have agreed to accept		\$	800.00	
	Prior to the filing of this statement I have received		\$	800.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compen	sation with any other person	unless they are mem	bers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				w firm. A
5.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspect	s of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statem c. Representation of the debtor at the meeting of creditors d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house 	nent of affairs and plan which and confirmation hearing, and duce to market value; exc as as needed; preparation	n may be required; and any adjourned hea emption planning;	rings thereof;	ling of
6.	By agreement with the debtor(s), the above-disclosed fee d Representation of the debtors in any disch any other adversary proceeding.	loes not include the following hargeability actions, judi	g service: cial lien avoidanc	es, relief from stay	actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the de	ebtor(s) in
	September 2, 2016	/s/ Jason H. Rock	(
_	Date	Jason H. Rock			
		Signature of Attorne BARRICK SWITZ	ER LAW OFFICE		
		6833 Stalter Drive	9		
		Rockford, IL 6110	ס ע		
		Name of law firm			

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United States Bankruptcy Court Northern District of Illinois

In re	James R. Mortensen Esther C. Mortensen		Case No.		
		Debtor(s)	Chapter 7		
	VERIFICATION OF CREDITOR MATRIX				
		Number of	f Creditors:	19	
	(our) knowledge.) hereby verifies that the list of credi	tors is true and correct to the	ne best of my	
Date:	September 2, 2016	/s/ James R. Mortensen			
		James R. Mortensen Signature of Debtor			
Date:	September 2, 2016	/s/ Esther C. Mortensen			
		Esther C. Mortensen			
		Signature of Debtor			

Alan S. Kaufman One East Wacker Drive, Suite 1250 Chicago, IL 60601

Capital One Retail Services PO Box 71106 Charlotte, NC 28272-1106

Cardmember Service P.O. Box 15153 Wilmington, DE 19886-5153

Chase PO Box 9001871 Louisville, KY 40290-1871

Citi Cards PO Box 78045 Phoenix, AZ 85062-8045

ComEd P.O. Box 6111 Carol Stream, IL 60197-6111

Edward Rose & Sons 38525 Woodward Ave Bloomfield Hills, MI 48304

Greensky PO Box 29429 Atlanta, GA 30359

Health Alliance 301 S. Vine Street Urbana, IL 61801

Nicor PO Box 5407 Carol Stream, IL 60197-5407

Payment Center City of Rockford PO Box 4635 Carol Stream, IL 60197-4635 Rockford Health Physicians Department 4701 Carol Stream, IL 60122-4701

Rockford Health Physicians Department 4701 Carol Stream, IL 60122-4701

Rockford Mercantile Agency, Inc. 2502 S. Alpine Road Rockford, IL 61108

Springleaf Financial P.O. Box 790368 Saint Louis, MO 63179-0368

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P.O. Box 4191
Carol Stream, IL 60197-4191

Synchrony Bank PO Box 9600061 Orlando, FL 32896-0061

Synchrony Bank PO Box 9600061 Orlando, FL 32896-0061

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